P23000012619

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COL	RPORATION: Praise 15 Inc			
DOCUMENT N	D22000012610			
The enclosed Art	ticles of Amendment and fee are su	ubmitted for filing.		
Please return all	correspondence concerning this ma	atter to the following:		
	Sandra M Louis			
	Name of Contact Person			
	Praise 15 Inc			
	Firm/ Company			
	250 Spanish Oak Trail			
		Address		
	Longwood, FL 32779			
	City/ State and Zip Code			
	office@thetaxshoppe.com			
		sed for future annual report notification)		
	(10 00 -	,		
For further inforr	nation concerning this matter, plea	se call:		Σ
	•		- ;	2
		at (٠,	013 201
N	ame of Contact Person	Area Code & Daytime Telephone Number	— .	
Enclosed is a che	ck for the following amount made	payable to the Florida Department of State:		÷.:
_		•		/5
■ \$35 Filing Fo	ee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	in T	': 30
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Praise 15 Inc		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P23000012619		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amer	ndment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."		rp.,"
B. Enter new principal office address, if applicable:		<u>5</u>
(Principal office address MUST BE A STREET ADDRESS)		-23 -23
	-	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
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	n	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stre	et address)	
New Registered Office Address:	, Florida	
į.	City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was	ith and accept the obligations of the position.	
Signature of New Re	gistered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c)	e), F.S.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_ <u>X</u> Add	_ <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Casandra Lagredelle	1633 Carriage House Trail Apt B
Add			Silver Spring, MD 20904
X Remove			
2) Change	VP	Florence Louis	250 Spanish Oak Trail
X Add			Longwood, FL 32779
Remove 3) Change			WE 30
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			- •
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
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f an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itse	shares,
(if not applicable, indicate N/A)	<u>:11.</u>

	12 September 2023	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will sartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Signaturo (By a tiin selected appointe	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary) Sandra M Louis	2623 SEF-18 Ah 9
-	(Typed or printed name of person signing)	
1	President	i i

(Title of person signing)